



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## BIB DATA SHEET

CONFIRMATION NO. 3188

<b>SERIAL NUMBER</b> 10/800,466	<b>FILING or 371(c) DATE</b> 03/15/2004 <b>RULE</b>	<b>CLASS</b> 002	<b>GROUP ART UNIT</b> 3772	<b>ATTORNEY DOCKET NO.</b> 06694-003001		
<b>APPLICANTS</b> Richard Cogswell, Spencer, MA; <b>** CONTINUING DATA *****</b> This appln claims benefit of 60/455,484 03/18/2003 <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b> 06/01/2004						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/KIM M LEWIS/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWINGS</b> 4	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> FISH & RICHARDSON PC P.O. BOX 1022 MINNEAPOLIS, MN 55440-1022 UNITED STATES						
<b>TITLE</b> Sleep-aiding device						
<b>FILING FEE RECEIVED</b> 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees			
			<input type="checkbox"/> 1.16 Fees (Filing)			
			<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)			
			<input type="checkbox"/> 1.18 Fees (Issue)			
			<input type="checkbox"/> Other _____			
<input type="checkbox"/> Credit						